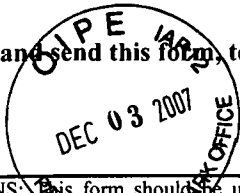


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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24902

7590

08/30/2007

KENNETH J. LUKACHER
SOUTH WINTON COURT
3136 WINTON ROAD SOUTH, SUITE 301
ROCHESTER, NY 14623

12/03/2007 HDEMESS2 00000088 09966043

01 FC:2501 720.00 OP
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Tammy S. Moynihan

(Depositor's name)

(Signature)

November 28, 2007

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/966,043	09/28/2001	Scott R. Grodevant	ML-0518CV	4278

TITLE OF INVENTION: AUTOMATIC GAIN CONTROL FOR A CONFOCAL IMAGING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	-NO- YES	\$1400- \$720	\$0	\$0	\$1400	11/30/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HENN, TIMOTHY J	2622	348-370000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. KENNETH J. LUKACHER

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LUCID, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ROCHESTER, NEW YORK

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date November 28, 2007Typed or printed name Kenneth J. LuKacherRegistration No. 38,539

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity)

(37 C.F.R. 1.311)

Docket No.

ML-0518CV

Applicant(s): Scott R. Grodevant

Application No.

09/966,043

Filing Date

09/28/2001

Examiner

Timothy J. Henn

Customer No.

024902

Group/Art Unit

2622

Confirmation No.

4278

Invention: AUTOMATIC GAIN CONTROL FOR A CONFOCAL IMAGING SYSTEM

Mail Stop Issue Fee

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Transmitted herewith are the following for the above-identified application.

☒ Issue Fee Transmittal Form PTOL-85☒ Utility Fee: \$ 720.00☐ Design Fee:☐ Plant Fee:☐ Publication Fee:☒ A check in the amount of \$726.00 is attached. (Issue Fee + 2 patent copies)☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-1101 as described below.☐ Charge the amount of☒ Credit any overpayment.☒ Charge any additional fee required.☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Dated: November 28, 2007

Signature

Kenneth J. LuKacher

Attorney for Applicant

Registration No. 38,539

South Winton Court

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Rochester, New York 14623

Telephone: 585-424-2670

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22313-1450" [37 CFR 1.8(a)] on

11/28/2007

(Date)

Signature of Person Mailing Correspondence

Tammy S. Moynihan

Typed or Printed Name of Person Mailing Correspondence